EMPLOYMENT TRACKING & DIRECT BENEFIT SUMMARY DATA

NAME OF LOCAL GOVERNMENT: _____

NAME OF ASSISTED ENTITY/BUSINESS _____

DUNS NUMBER FOR BUSINESS : _____

NAIC CODE: _____

DOES BUSINESS PROVIDE HEALTH CARE BENEFITS: _____

CDBG CONTRACT #: _____

FORM COMPLETED FOR QUARTER ENDING _____

Total FTEs Trained to Date/Toal LMI FTEs Trained to Date:_____ /_____

Total FTEs Created to Date / Total LMI FTE Hires to Date: _____ /_____

Total FTEs Retained to Date: _____

PAYROLL VERIFIED BY: _____

DATE: _____

EMPLOYEE NAME	EMPLOYEE POSITION/ ID NUMBER	JOB CODE (Key #1)	HIRE STATUS (Key #2)	DATE HIRED	DATE TERMINA TED	FT / PT (Key #3)	FTE % ie. .5, .75, 1.0 (Key #4)	P / S (Key #5)	RATE OF PAY (Hourly Rate)	INCOME LEVEL (Key #6)	RACIAL CAT. (Key #7)	ETHNIC CAT. (Key #8)	M	F	H	FHH
													(Key #9)			

K E Y :

JOB CODES (KEY #1)
A = Officials and Managers
B = Professional
C = Technicians
D = Sales
E = Office and Clerical
F = Craft Workers (Skilled)
G=- Operatives (Semi-Skilled)
H = Laborers (Unskilled)
I = Service Workers

HIRE STATUS (KEY #2)
NHT = FTE in Training
NH = New Hire
R = Retained

FT/PT (KEY #3)
FT = Full Time
PT = Part Time

FTE % Conversion (Key #4)
Hours worked per week / 40 hours:
20 hrs/wk = 0.5 FTE (20 hrs/40 hrs) enter 0.5
30 hrs/wk - 0.75 FTE (30 hrs/40 hrs) enter .75

P /S (KEY #5)
P = Permanent
S = Seasonal

INCOME LEVELS (KEY #6)
EL = Extremely Low
L = Low
M = Moderate
NL = Non-Low/Moderate

RACIAL CATEGORY: (KEY #7)
1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Native Hawaiian or Other Pacific Islander
5. White
6. American Indian or Alaska Native and White
7. Asian and White
8. Black or Aftican American and White
9. American Indian or Alaska Native and Black or African American

E.C.-Ethnic Category (Key #8)
Y = Hispanic or Latino
N = Not Hispanic or Latino

Misc. (Key #9)
M = Male
F = Female
H = Handicapped
FHH = Female Head of Household